

PART B - FEE(S) TRANSMITTAL

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37462

7590

11/09/2006

LOWRIE, LANDO & ANASTASI
 RIVERFRONT OFFICE
 ONE MAIN STREET, ELEVENTH FLOOR
 CAMBRIDGE, MA 02142

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Rose Daniels	(Depositor's name)
<i>Rose Daniels</i>	(Signature)
February 9, 2007	(Date)

02/12/2007 FHETEK12 00000068 09802093

01 FC:2501 700.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/802,093

03/08/2001

Shintaro Asano

12565-036
C2003-700110

4936

TITLE OF INVENTION: METHOD AND SYSTEM FOR REMOTELY BACKING UP A COMPUTER MEMORY UTILIZING A GLOBAL COMMUNICATIONS NETWORK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO Yes	\$1,400 \$700.00	\$0	\$0	\$1,400 \$700.00	02/09/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
WILSON, YOLANDA L	2113	714-004000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Lowrie, Lando & Anastasi, LLP
 2
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cablynx, Inc.

Woburn, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☒ A check is enclosed.
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 5072762 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

(Ref. No.: C2003-700110)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date February 9, 2007

Typed or printed name Thomas M. Sullivan

Registration No. 39,392

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